



Who Speaks for the Patient?

Ethics Core Curriculum

Ethical Principals



- Beneficence
- Malfeasance
- Patient Autonomy
- Justice

Systematic Approach to Ethical Evaluation

- Medical indications (B&M)
- Quality of life (B&M)
- Patient preference (Autonomy)
- Contextual features (Justice)

Why do we need proxy decision making?

- Joseph Saikewicz - 1976
 - 67 yo institutionalized male with IQ of 10 and estimated age of 2.5 yrs.
Diagnosed With AML
- Karen Ann Quinlan - 1975
 - 22 yo persistent vegetative state.

Proxy Decision-making



- Incompetent patient's right to refuse medical care may be exercised through a proxy.
- Knowing the patient's wishes, the proxy makes the decision the patient would.
- In the absence of proxies, doctors might act out of self interest to avoid litigation

Objections to Proxy Decision-making



- At best an approximation of patient's wishes
- Subject to biases, values, and psychological agendas of the proxy
- Conflict of interest – emotional and financial burdens
- Decisions are psychologically stressful

Mechanisms for Proxies



- Living Will – end of life care
- Durable power of attorney –during life care
- Legally heirarchy
 - Legal Gaurdian, DPA, Spouse, Adult Children, Parents, Siblings

Anesthesiologists



Courts have found anesthesiologists liable for harm that comes to the patient while under anesthesia...

When?



- Unconscious and will not regain consciousness before a decision needs to be made.
- Conscious but legally incompetent
 - must be declared by judge
- Conscious but immature

Approach to ethical dilemmas



- Medical indications
- Quality of life
- Patient preferences
- Contextual features



- Patient refusal does not constitute incompetence
- Neither do different beliefs or values
- Mental illness retardation

Case Studies on Monday

